

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>10</i>		<i>12/20/01</i>
O.I.P.E. CLASSIFIER		<i>21</i>	<i>12/1/01</i>
FORMALITY REVIEW	<i>P.B.</i>	<i>1137</i>	<i>12/03/01</i>
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Best Available Copy

Claim	Date
Final	
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If more than 150 claims or 10 actions  
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*10/3/01*